FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS  CAMPAIGN TREASURER'S REPORT SUMMARY							
(1) Gabrielle REdfern  Name  (2) 4539 Royal Palm Avenue  Address (number and street)  Miami Beach, FL 33140	OFFICE USE ONLY  OFFICE						
City, State, Zip Code  CHECK IF ADDRESS HAS CHANGED  (3) ID Number:  Check appropriate box(es):  Candidate (office sought): Miami Beach, Commissioner, Group 1  Political Committee  CHECK IF PC HAS DISBANDED  CHECK IF CCE HAS DISBANDED  Party Executive Committee  Electioneering Communication  CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED							
(5) REPORT IDENTIFIERS  Cover Period: From 01 / 01 / 05 To 03 / 31 / 05 Report Type Q1  XX Original ☐ Amendment ☐ Special Election Report ☐ Independent Expenditure Report							
(6) CONTRIBUTIONS THIS REPORT         Cash & Checks       \$ 75.00         Loans       \$ 100.00         Total Monetary       \$ \$175.00         In-Kind       \$	(7) EXPENDITURES THIS REPORT  Monetary Expenditures \$ \$69.19  Transfers to Office Account \$  Total Monetary \$ \$69.19						
(9) TOTAL Monetary Contributions To Date \$ 175.00	(8) Other Distributions \$ (10) TOTAL Monetary Expenditures To Date \$ 69.19						
(11) CERTIFICATION  It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)							
I certify that I have examined this report and it is true, correct, and complete.  I certify that I have examined this report and it is correct, and complete.  I certify that I have examined this report and it is correct, and complete.  I certify that I have examined this report and it is correct, and complete.  I certify that I have examined this report and it is correct, and complete.  I certify that I have examined this report and it is correct, and complete.  I certify that I have examined this report and it is correct, and complete.  I certify that I have examined this report and it is correct, and complete.  I certify that I have examined this report and it is correct, and complete.  I certify that I have examined this report and it is correct, and complete.  I certify that I have examined this report and it is correct, and complete.  I certify that I have examined this report and it is correct, and complete.							

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## CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Gabrielle Redfern				(2) I.D. Number				
	d <u>01 / 01 / 05</u>		ough 03	/ 31 / 05	5_ (4) Page		<del></del>	
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)	0.	(8)	(9)	(10)	(11)	(12)	
Sequence Number	Street Address & City, State, Zip Code	Type	Occupation	Туре	Description	Amendment	Amount	
01, 31, 05	Redfern ; FG	I	Consul.	LOA			\$100.00	
001								
02, 08 , 05	Sonnenrich, P 2600 Virginia NW Suite 301 Washington DC	A A	Publish	erCHE			\$75.00	
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SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

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## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) NameGabrielle Redfern					(2) I.D. Number				
(3) Cover Perio	d 01	701	/2005 <b>through</b> 03	/31	/ 2005	(4) Page	1	of <u>1</u>	

(5)	(7)	(8)	(9)	(10)	(11)
Date (6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
02/08/05	City National Bank 300 71 Street Miami Beach FL 33141	Checks	Mon for		\$15.75
02/28/05	City National Bank 300 71 Street Miami beach FL 33141	Bank Frances	WON pur		\$150000
03/07/05	Board of County Commissioners	Voter List	mon fu		\$38.44
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